Country: Lea LP N LIVIT To Country Service of the				ER WELL RECORD	Form WWC-5	KSA 82a-			
WATER WELL OWNER RRH. St. Address, Box a SECULATION WITH DESCRIPTION WELL STATE OF COMPLETED WELL SWELL STATE OF BUSINES WELL STATE OF BUSINES SWELL WELL STATE DE USED AS: SOCIETE BLANK CASINUSED: 1 Steel 3 RIMF (SR) SWELL WELL STATE DE USED AS: SOCIETE STATE DE USED AS: SOC	County: Leave	mwith			E 14	tion Number			Range Number
WATER WELL OWNER: City, State, 2IP Code 3 580 5 5 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	~ ~	from nearest town		•	•	4 Hi	6 x 1.7		
Based of Agriculture, Division of Water Resource, State Decode 3 Set Set 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		AIED: A			0 // 7		vy —		
Contractions of the contraction	<i>-</i>		p 60 //	O hST.					
LOCATE WELL'S LOCATION WITH Depth of COMPLETED WELL The No. The SCITION BOX: Depth of Groundwater Encountered 1,		X # : -			6	- 111			Division of Water Resourc
Depthie) Groundwater Encountered 1	City, State, ZIP Code	: 3>0 <i>0</i>	DE 8.	n Ispeka	100	5 6661	Application	Number:	
WELL STATIC WATER LEVEL. WELL STATIC WATER LEVEL. WELL STATIC WATER LEVEL. Purpus plat data: "Well water was the after hours pumping. 9 gets type of the state	LOCATE WELL'S L	NH()X·	-						
Pump lost data: Well water was ft. after hours pumping g Est. Yield ft. ft. ft. ft. ft. ft. ft. ft. ft.									
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Bone Hole Diameter \$ in. to \$	NW	NE							
We will be seemed to the seement of									
We will be seemed to the seement of	• i		Bore Hole Diam	eter. 7 in. to	23	ft., a	nd	in	. to
TYPE OF BLANK CASING USED: 1 Steel 3 Fisher 1 Steel	§ W			•	- •				
TYPE OF BLANK CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Gladed A. Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded 1 Steel 3 RMP (SR) 7 Fiberglass 1 In. to 1. to	- i	1 i 1 i	-				•		•
Was a chemical/bacteriological sample submitted to Department? Yes. No :if yes, moldaylyr sample was mitted mitted mitted mitted with the mitted mitted mitted mitted mitted with mitted	SW	SE	•				•		Ciries (Opeciny below)
TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 7 Fiberglass 7 Fiberglass 7 Fiberglass 8 Fiberglass 1 Steel 3 Stainless steel 6 Fiberglass 9 ABS 12 None used (open hole) 1 Other (specify) 1 Othe	1	1 1 1 1	-		-	_		,	
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Steller 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Threaded. 7 Fiberglass Threaded. 7 Fiberglass Threaded. 7 Fiberglass Threaded. 1. Dia in. to Ibs./ft. Wall thickness or gage No. S. Dia 26. 1 Steller 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) 11 Other (specify) 2 Continuous slot 3 Mill slot 6 Wire wrapped 1 Continuous slot 3 Mill slot 6 Wire wrapped 2 Coursed shufter 4 Key punched 7 Torch cut 9 11 Other (specify) 12 Other (specify) 12 Other (specify) 12 Other (specify) 11 Other (specify) 12 Other (specify) 13 Other (specify) 14 Other (specify) 14 Other (specify) 15	TYPE OF BLANK	CASING USED:		5 Wrought iron	8 Concre	te tile	CASING JOI	NTS: Glued	d Clamped
Billow Casing diameter S. In by 7 Fiberglass Threaded. Slasing height above land surface 1 In weight 15 In	1 Steel	3 RMP (SR)	١	•	9 Other (specify below	١	Weld	ed
Stank Casing diameter		, ,	,		,		•		
Casing height above land surface. 2.7. in., weight by the content of the content			100	1					
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From	SCREEN-PERFORATI	ED INTERVALS:	From. /	<i>90</i> ft. to	129	ft. From	1	ft. t	o
GRAVEL PACK INTERVALS: From									
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GROUT MATERIAL: 1 Neat cement Count Intervals: From	GRAVEL PA	CK INTERVALS:	From					π. τ	0
Grout Intervals: From				ft. to		ft., Fron	<u> </u>	ft. t	0 1
Grout Intervals: From ft. to ft., From ft. ft., From ft. to ft., From ft. ft., From ft. to ft., From ft. ft., From ft., From ft. ft., From ft., Fro	GROUT MATERIAL	.: 1 Neat ce	ement	(2)Cement grout	3 Bentor	nite 4 (Other		
What is the nearest source of possible contamination: Septic tank	Grout Intervals: Fro	m <i>Q</i> f	t. to 3.3	ft., From	ft. t	0	ft., From	. .	ft. to
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completed on (mo/day/year)	CONTRACTOR'S	DR LANDOWNER'	S CERTIFICAT	TION: This water well w					
	completed on (mo/day	/year) /	S CERTIFICAT			and this recor	d is true to the be	st of my kn	owledge and belief. Kansa
under the business name of Robison Drilling by (signature)	completed on (mo/day	/year) /	S CERTIFICAT			and this recor	d is true to the be		owledge and belief. Kansa
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRML and PRINT clearly. Please fill in blanks, underline or circle are correct answers. Send top three copies to Kansas	completed on (mo/day Water Well Contractor under the business na	/year) /)	394 De	This Water W	/ell Record was	and this recor s completed of by (signat	d is true to the been (mo/day/yr) . ure)	st of my kn	owledge and belief. Kansi
Department of Health and Environment, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Marsas 66620-7500, Telephone: 913-862-9360. Send one	completed on (mo/day, Water Well Contractor under the business na INSTRUCTIONS: Use to	/year)	376 Son De pen PLEASE PRE	This Water W	/ell Record was	and this records completed of by (signat blanks, underline	d is true to the be on (mo/day/yr) . ure)	st of my kn	owledge and belief. Kansa double three copies to Kansas
to WATER WELL OWNER and retain one for your records.	completed on (mo/day, Water Well Contractor, under the business na INSTRUCTIONS: Use to Department of Health ar	/year)	39.6 pen. <u>PLEASE PRE</u> of Oil Field and E	This Water W	/ell Record was	and this records completed of by (signat blanks, underline	d is true to the be on (mo/day/yr) . ure)	st of my kn	owledge and belief. Kansa double three copies to Kansas

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